



**KING COUNTY COMMUNITY LEGISLATIVE FORUM:
2006 Legislative Priorities for Mental Health**

FULLY FUND MEDICAID MENTAL HEALTH SERVICES

The funding that Regional Support Networks (RSN) receive for Medicaid-covered mental health services is based on actuarially determined rates that are based on the actual costs of providing Medicaid-covered services. Due to insufficient state match being available, the state set rates at the bottom of the actuarial ranges. This has led to a crisis as RSNs across the state have insufficient Medicaid funds to provide adequate services to all those in need. The Department of Social and Health Services has indicated that the Governor will propose a supplemental appropriation to bring Medicaid rates for each RSN up to the middle of its actuarial rate range. We urge King County legislators to support this supplemental appropriation. This will prevent an erosion of services which would lead to a “death spiral” of service cuts leading to lower actuarial rates, leading to further services cuts, leading to further cuts in federal funding.

ASSURE TIMELY ACCESS TO INVOLUNTARY EVALUATION AND TREATMENT

An essential public health and safety function is involuntary mental health evaluation and treatment. There is now a critical shortage of involuntary treatment beds in King County and across the state. This has resulted in the regular practice of “boarding” involuntarily-detained individuals for many hours, and even days, in emergency rooms and hospitals that do not provide psychiatric care. This crisis is the result of several factors, including the loss of many community psychiatric beds, the downsizing of the state hospitals, several recent changes in the commitment laws, and the increase in state population. The state must immediately act to open up more state hospital beds, while ending the practice of assessing “liquidated damages” on RSNs for exceeding arbitrary bed quotas, since these damages must be paid from state funds which further erodes the ability of RSNs to provide needed community care.

**PROVIDE EQUAL ACCESS TO MENTAL HEALTH SERVICES ACROSS THE STATE
FOR INDIVIDUALS WHO ARE NOT ON MEDICAID**

The Mental Health Division (MHD) did not follow the directions for allocating non-Medicaid funds spelled out in the 2005 budget passed by the legislature. If legislative intent had been followed, King County RSN would have received \$30.7 million instead of the \$23.3 million allocation. King County, with 29% of the state population, will receive only 23% of the non-Medicaid funding. As a result of this funding allocation decision, starting January 1, 2006, King County will be unable to serve any individuals who are not covered by Medicaid, while other RSNs will be able to serve anyone regardless of Medicaid coverage. The state needs to allocate funding that is based on fairness and equity. The allocation formula that was applied does not meet that standard.

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